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Dated: April 11, 2005 Signature: _____

(Amy E. Mandragouras)

Docket No.: BGNA046CPRCE
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Jeffrey L. Browning *et al.*

Application No.: 09/626219

Confirmation No.: 7978

Filed: July 26, 2000

Art Unit: 1642

For: Treatment of Follicular Lymphomas Using
Inhibitors of the LT Pathway

Examiner: M. Yu

AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)

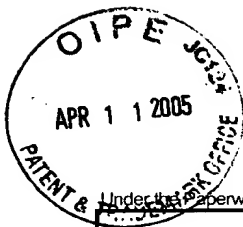
MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Final Office Action dated September 20, 2004, rejecting claims 20, 24-26, 31-33 and 36-53, please amend the above-identified U.S. patent application as follows:

Remarks/Arguments begin on page 2 of this paper.



04.13.05

AF ZW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/626219-Conf. #7978
	Filing Date	July 26, 2000
	First Named Inventor	Jeffrey L. BROWNING
	Art Unit	1642
	Examiner Name	M. Yu
Total Number of Pages in This Submission	Attorney Docket Number	BGNA046CPRCE

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Amy E. Mandragouras		
Date	April 11, 2005	Reg. No.	36,207

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